

PATENT APPLICATION FEE DETERMINATION RECORD
Effective October 1, 2000

Location or Docket Number

09/890273

CLAIMS AS FILED - PART I

(Column 1) (Column 2)

| | | |
|--|---------------------|--------------|
| TOTAL CLAIMS | | |
| FOR 14 | NUMBER FILED | NUMBER EXTRA |
| TOTAL CHARGEABLE CLAIMS | 32 minus 20= | 12 |
| INDEPENDENT CLAIMS | 8 minus 3= | 5 |
| MULTIPLE DEPENDENT CLAIM PRESENT <input checked="" type="checkbox"/> | | |

AS per Pre-Amd.

* If the difference in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II

(Column 1) (Column 2) (Column 3)

| | | | | | |
|-------------|---|----------------------------------|-------|------------------------------------|---------------------------------------|
| AMENDMENT A | 8/09/01 | CLAIMS REMAINING AFTER AMENDMENT | | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
| | Total | 32 | Minus | 32 | = <input checked="" type="checkbox"/> |
| | Independent | 8 | Minus | 8 | = <input checked="" type="checkbox"/> |
| | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> | | | | |

SMALL ENTITY TYPE ☐

OR OTHER THAN SMALL ENTITY

| | | | | |
|-----------|-----|----|-----------|-------------|
| RATE | FEE | | RATE | FEE |
| BASIC FEE | | OR | BASIC FEE | 860 |
| X\$ 9= | | OR | X\$18= | 216 |
| X40= | | OR | X80= | 400 |
| +135= | | OR | +270= | 270 |
| TOTAL | | OR | TOTAL | 1746 |

SMALL ENTITY

OR OTHER THAN SMALL ENTITY

| | | | | |
|------------------|----------------|----|------------------|-------------------------------------|
| RATE | ADDITIONAL FEE | | RATE | ADDITIONAL FEE |
| X\$ 9= | | OR | X\$18= | <input checked="" type="checkbox"/> |
| X40= | | OR | X80= | <input checked="" type="checkbox"/> |
| +135= | | OR | +270= | <input checked="" type="checkbox"/> |
| TOTAL ADDIT. FEE | | OR | TOTAL ADDIT. FEE | <input checked="" type="checkbox"/> |

9-25-07

(Column 1) (Column 2) (Column 3)

| | | | | | |
|-------------|---|----------------------------------|-------|------------------------------------|---------------|
| AMENDMENT B | | CLAIMS REMAINING AFTER AMENDMENT | | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
| | Total | 32 | Minus | 32 | = 0 |
| | Independent | 8 | Minus | 8 | = 0 |
| | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> | | | | |

| | | | | |
|------------------|----------------|----|------------------|----------------|
| RATE | ADDITIONAL FEE | | RATE | ADDITIONAL FEE |
| X\$ 9= | | OR | X\$18= | 0 |
| X40= | | OR | X80= | 0 |
| +135= | | OR | +270= | 0 |
| TOTAL ADDIT. FEE | | OR | TOTAL ADDIT. FEE | 0 |

(Column 1) (Column 2) (Column 3)

| | | | | | |
|-------------|---|----------------------------------|-------|------------------------------------|---------------|
| AMENDMENT C | | CLAIMS REMAINING AFTER AMENDMENT | | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
| | Total | | Minus | | = |
| | Independent | | Minus | | = |
| | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> | | | | |

| | | | | |
|------------------|----------------|----|------------------|----------------|
| RATE | ADDITIONAL FEE | | RATE | ADDITIONAL FEE |
| X\$ 9= | | OR | X\$18= | |
| X40= | | OR | X80= | |
| +135= | | OR | +270= | |
| TOTAL ADDIT. FEE | | OR | TOTAL ADDIT. FEE | |

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.